

APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES
OFFICE OF ADMINISTRATIVE SERVICES
RECORDS MANAGEMENT UNIT

For instructions on completing this form contact DHR Records Management Unit, 47 Trinity Avenue, Atlanta, Georgia 30334. Phone - (404) 656-4976 GIST: 221-4983

DHR	1. GEORGIA DEPARTMENT OF HUMAN RESOURCES Office of District Programs Volunteer Services 2nd Floor - 618 Ponce de Leon Ave., N.E. Atlanta, Georgia 30306	ARCHIVES AND HISTORY Application Number 79-120
Application Date May 22, 1979		Date Received MAY 25 1979
Application Number DHR 79-19		Date Completed JUL 5 1979

2. Person to Contact Ms. Sadie Rogers	Working Title Program Consultant	Telephone Number 894-5074
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3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supercede; <input type="checkbox"/> Void
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4. Dates of Series Earliest 1975	Latest to present	5. Records Series Title (followed by title used in office, if different) Volunteers in Service to America (VISTA) Project Files
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6. Division and Office Function	What is the function of the Division and the Office in which this record series is created? The Office of District Programs supervises the Special Councils on Aging, Maternal and Infant Health, Family Planning, Developmental Disabilities, Appalachian Health and Child Development, State Office of Economic Opportunity, Volunteer Services, and Child Development.

7. Records Series Description	This file contains the following documents (include form numbers and titles, if any): Attach samples of the file. Documents relating to: maintaining records of projects served by persons known as Vista Volunteers.
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Included are: Project narrative, a proposal application for a Federal grant from ACTION. This narrative shows basic information about applying organization (type, name, address), Congressional District; names and signatures of project director and other appropriate personnel, telephone number, and type of ACTION assistance requested; states specific problems, major causes of problem(s) and major consequences of problem(s); goals and objectives expected to improved situation and planned period of accomplishment; specifically what will be expected of the VISTA Volunteer; description of resources and community involvement; description of how the project will be managed, and qualifications of staff; name(s) of VISTA Volunteer(s) working with a particular project; performance evaluation for each VISTA; weekly activities report of activities for each VISTA; and related correspondence.

The file is arranged : by project year; thereunder, by component number assigned by Volunteer Services.

8. Monthly Reference Rate One to six months old <u>12-15</u> twenty-five months and older <u>rarely</u>	How often are records referred to which are: Seven to twelve months old <u>12-15</u> ; Thirteen to twenty-four months old <u>occasionally</u>
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9. Annual Rate of Accumulation of Records Letter-size drawers <u>1/3</u>	Legal-size drawers _____; Shelves _____; Other (Specify) _____
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YES NO 10. Questionnaire (Place an "X" in the proper column)

X	a. Is this the official copy of the series? If not, where is it?
X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
X	c. Is this a vital record?
X	d. Does this series have historical or long term research value?
X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
X	f. Is the information contained in this series ever published? If yes, attach copy.
X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
X	i. Is this series (or a major portion of it) regularly microfilmed?
X	j. Does the record series result in a computer printout?

11. Retention Requirements

The following requires the series to be kept:

a. State Law	_____ years.	d. Audit period	_____ years.
b. Statute of limitation	_____ years.	e. Administrative need	5 _____ years.
c. Federal law	_____ years.	f. Federal retention instructions	_____ years.

Attach copy or excerpt of laws or regulations. Explain administrative need.

see attached regulations 1.3 and 9.2 ; however, responsibility for this project is being changed and it is requested that records be held 5 years for resolution of any questions which may arise.

12. Approved Disposition Instructions This agency recommends that the file series be cut off at the end of each:

Calendar Year; Fiscal Year; Other _____ then,

- Hold in the current files area _____ month(s) _____ year(s); then
 Transfer to local holding area; hold _____ year(s); then
 Transfer to State Records Center; hold _____ year(s); then
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 Transfer to State Archives for permanent retention.
 Other (Specify)

Upon termination of project, place all papers for that particular project in the inactive file; cut off inactive file at end of each calendar year; transfer to State Archives for permanent retention.

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
Stanley Wise	5-21-79	Elizabeth W. Crank	5/21/79
		Elizabeth W. Crank, C.R.M. State Records Committee (Signature)	
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)	State Auditor/Designee <i>OK</i>	<i>L. W. Crank</i>	7-3-79
	Secretary of State/Designee <i>C. H.</i>	<i>Canole, Had</i>	6-29-79
	Attorney General/Designee <i>M. J. M.</i>	<i>M. J. M.</i>	7-5-79